



Mott Poll Report

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Do Parents Have Selective Hearing about Flu Vaccine for Children?

Annual flu vaccination is recommended for all children 6 months and older due to the risk of death or serious complications from influenza. However, the vaccine rate among US children is much lower for flu vaccine than for other childhood vaccines. The C.S. Mott Children's Hospital National Poll on Children's Health asked a national sample of parents about what influences their decision to get or not get flu vaccine for their child.

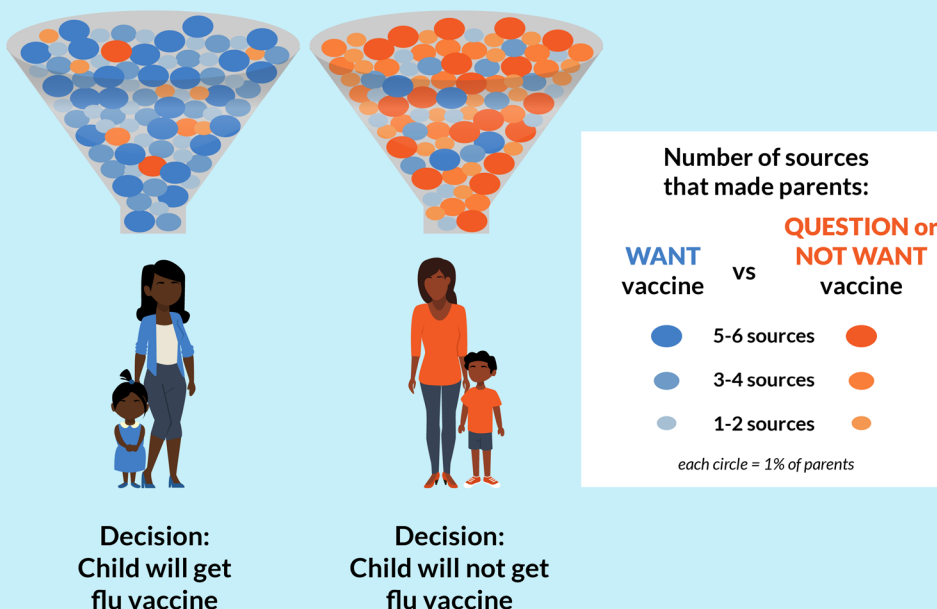
Two thirds of parents said their child would get flu vaccine this year, while 34% said their child was unlikely to do so. Most parents indicated their child's health care provider strongly (51%) or mostly (26%) recommends flu vaccine; 21% did not recall the provider making a recommendation, while 2% said the provider recommended against flu vaccine.

In making decisions about flu vaccine, 48% of parents said they usually follow the recommendation of their child's health care provider, while 38% said they make their own decision based on what they read or hear. Among parents who usually follow the recommendation of their child's health care provider, 87% said their child would get flu vaccine this year. However, among parents who decide based on what they read or hear, only 56% said their child would get flu vaccine this year.

Parents who said their child would get flu vaccine this year reported four times more positive sources (those that made them want flu vaccine for their child) than negative sources (those that made them question or not want flu vaccine). The positive sources that made these parents want to get flu vaccine included comments from the child's health care provider (67%) or nurses/medical staff (59%), comments from family or close friends (47%) or other parents (42%), parenting books or magazines (34%), and Internet sites (33%).

In contrast, parents who said their child would not get flu vaccine this year reported seven times more negative sources than positive sources about flu vaccine. The most frequent sources that made these parents question or not want flu vaccine for their child included comments from family or close friends (45%) or other parents (44%), Internet sites (40%), comments from the child's health care provider (35%) or nurses/medical staff (32%), and parenting books or magazines (32%).

Echo chamber: Parents hear information that reinforces their decision about child's flu vaccine



Source: C.S. Mott Children's Hospital
National Poll on Children's Health, 2018

Report Highlights

Provider recommendation is linked to high flu vaccine rates, but 1 in 5 parents said their child's provider did not make a recommendation.

Parents of children not getting flu vaccine this year reported 7 times more negative sources than positive sources about flu vaccine.

Comments from family, friends, and other parents were the most common sources prompting parents to question or not want flu vaccine for their child.

Data Source & Methods

This report presents findings from a nationally representative household survey conducted exclusively by GfK Custom Research, LLC (GfK), for C.S. Mott Children's Hospital. The survey was administered in October 2018 to a randomly selected, stratified group of parents age 18 and older (n=2,007). Adults were selected from GfK's web-enabled KnowledgePanel® that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 60% among panel members contacted to participate. This report is based on responses from 1,977 parents who had at least one child 1-18 years. The margin of error is ±1 to 4 percentage points.

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C.S. Mott Children's Hospital National Poll on Children's Health

Co-Director: Sarah J. Clark, MPH
Co-Director: Gary L. Freed, MD, MPH
Poll Manager: Dianne C. Singer, MPH
Data Analyst: Acham Gebremariam, MS
Research Associate: Sara L. Schultz, BA

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Implications

In the last flu season, spanning Fall 2017 through Spring 2018, a record-setting 180 children died from influenza. Less than sixty percent of children had received flu vaccine, even though annual flu vaccine has been recommended for children 6 months and older since 2010. Children who do not get flu vaccine, even those who are otherwise healthy, are at increased risk for death or serious influenza-related illness.

This Mott Poll report identifies the two main approaches that parents use to decide whether their child will get flu vaccine. The first approach, used by about half of parents, is following the advice and recommendation of the child's health care provider. Parents in this group may have questions or concerns about flu vaccine, but rely on a doctor or other health professional with scientific expertise to explain why vaccination is necessary, and to address questions about flu vaccine safety and effectiveness.

When parents follow the health care provider's recommendation, children usually get flu vaccine. However, this is not always the case: 1 in 5 parents in this Mott Poll did not recall the provider giving a specific recommendation about flu vaccine.

Whether in the absence of a provider recommendation, or due to parental preference, nearly 4 in 10 parents decided about flu vaccine for their child based on what they read and hear. Parents who take this approach may encounter a range of information sources. Some of those sources may offer accurate information, while others offer misinformation, such as suggesting that flu vaccine causes the flu, that influenza is not a serious disease, or that healthy children do not suffer serious consequences from influenza. In many cases, parents have limited expertise that would help them distinguish accurate information from misinformation; this can lead parents to make a decision about flu vaccine that may not be in the best interest of their child's health.

A noteworthy finding from this Mott Poll is that there may be somewhat of an echo chamber of information sources about flu vaccine for children. Parents who decided to get flu vaccine for their child reported hearing or seeing information about flu vaccine that is largely in favor of flu vaccine – in fact, these parents reported four times as many information sources that prompted them to want to get their child vaccinated. The opposite was true for parents who decided that their child will not get flu vaccine: they reported seven times as many information sources that made them question or not want to have their child vaccinated. In both cases, parents recalled information that supported their flu vaccine decision.

The reason for this echo chamber may be multifaceted. Some parents may seek out specific people and information sources who support their already-established opinions on vaccines, creating an information environment that confirms their decision and shuts out dissenting views. Other parents may encounter a broader range of information but have “selective hearing” in remembering only those sources that support their decision on whether their child will get flu vaccine.

Overall, findings suggest that child health providers play a critical role in helping many parents understand the importance of annual flu vaccine for children. However, for many parents, child health providers are not the sole influence, or even the primary influence, on decisions about flu vaccine. As such, other mechanisms are needed to convey accurate information, in language parents can understand, about the importance of annual flu vaccine for children.